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VOLUME IV
NUMBER II

FEBRUARY 1972

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INDEX of DERMATOLOGY

Including:

Clinical dermatology
Investigative dermatology
Dermatopathology

Published by

AMERICAN ACADEMY OF DERMATOLOGY
AMERICAN DERMATOLOGICAL ASSOCIATION
DERMATOLOGY FOUNDATION
NATIONAL PROGRAM FOR DERMATOLOGY
SOCIETY FOR INVESTIGATIVE DERMATOLOGY

9650 Rockville Pike, Bethesda, Md. 20014

INDEX of DERMATOLOGY

. . . a monthly guide to literature in clinical dermatology, investigative dermatology and dermatopathology.

EXPLANATORY PREFACE

The Index of Dermatology is being published as a service sponsored jointly by the American Academy of Dermatology, the American Dermatological Association, the Dermatology Foundation, the National Program for Dermatology and the Society for Investigative Dermatology, in cooperation with the National Library of Medicine (NLM). It was established and developed over a period of three years by Universities Associated for Research and Education in Pathology (UAREP), under a grant from the NLM which expired in June 1971.

The Index includes many citations of interest to dermatologists which are not listed by Index Medicus in a way to suggest their dermatological relevance. This is because articles are cited by Index Medicus under an average of three main headings, which derive from their principal points of emphasis. Many of the same articles, however, contain significant dermatological information or comment, and are stored in the Library's computer under the relevant additional headings. For the Index of Dermatology, all citations are retrieved only on the basis of their relevance to dermatology. Thus it provides a readily-usable reference to articles of interest to the dermatologist which are cited by Index Medicus, regardless of their main emphases.

Citations for each month's Index are computer-selected from the current month's total input of the National Library of Medicine's Medical Literature Analysis and Retrieval System (MEDLARS).

For the most part, as in the case of Index Medicus itself, the literature searched for this Index does not include books, monographs, papers or other materials not published in periodical professional journals. For review articles, a broader search is conducted.

The format, typographical style and hierarchical organization of subject headings in this Index are identical to those employed by the National Library of Medicine in publishing the Index Medicus. Thus familiarity with the system of Medical Subject Headings (MeSH), by which NLM maintains controlled access to biomedical literature references stored in its computers, will greatly facilitate the use of this Index.

The user should bear in mind the fact that access to subject information in the MEDLARS computer is possible only by using the headings under which it is stored. This controlled vocabulary, revised annually by NLM, contains roughly 8000 main headings. Alteration of the MeSH system in order to adjust to changes in the current usage of a speciality is therefore complex. Understanding of this will help to explain occasional anachronisms. Where these occur, the editors have attempted to provide suitable cross-references. This is, of course, a continuing process.

Familiarity with MEDLARS and the MeSH vocabulary, and thus the usefulness of this Index as well as of Index Medicus, will be greatly enhanced by reading "Principles of MEDLARS" and "Medical Subject Headings", both of which may be obtained from the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402. (The GPO's price for the first is $0.75 and the second $3.00). The latter, which gives all MeSH headings, with sub-headings and definitions, is also printed as part 2 of the January Index Medicus.

A few basic guidelines, however, may be stated briefly:

The MeSH terms used are usually in a direct, natural sequence (e.g., DERMOID CYST, ECTODERMAL DYSPLASIA). Inversion sometimes occurs (e.g., ECTODERMAL DEFECT, CONGENITAL). In order to relate various terms sharing a basic concept, there is a sequential arrangement of

the terms under the basic concept (i.e., CARCINOMA, BASAL CELL; CARCINOMA, BASOSQUAMOUS; CARCINOMA, EPIDERMOID).

The cardinal indexing rule in applying MeSH is always to use the most specific term available; thus, an article concerned with decubitus ulcer will be found under that term rather than the broader term ULCER. Under the latter would be found articles concerned with ULCER generally, or those directed to specific ulcers not listed separately in MeSH.

Each citation will be found normally under several headings, in the same manner as in the Index Medicus. In each case the entry appears in full, containing the following elements in order: title of the article, in original English or translation (in brackets if translated); principal author; journal title abbreviation; volume number; inclusive page numbers; date of issue; and, if not in English, an abbreviation in parentheses denoting the language. If the article is a review article, the number of references cited is given in parentheses, e.g. (182 ref.).

If any particular heading does not appear, it may be assumed that no relevant articles were found under that heading in the literature search for that month.

SPECIAL NOTES: No citations are given for "Venereal Disease" or for any of the specific diseases in that group. A detailed bibliography entitled Abstracts of Current Literature on Venereal Disease, which includes references appearing in Index Medicus, is published four times yearly by the National Center for Disease Control. This publication may be obtained by writing to VD Branch, NCDC, Atlanta, Georgia, 30333. This organization also has available limited bibliographic services.

The user will note that dates of publication for some references are less current than for others. This may result from delays in receipt and translation of foreign publications, or from the NLM's assignment of indexing priorities to various publications.

A few references may be found which, at least judging by the title, may have little relevance to the field. This results from the extremely broad coverage for which the MeSH system of headings and sub-headings was designed. Efforts are made to hold such apparent discrepancies to a minimum.

Reprints of articles cited cannot be supplied by the Index or by the NLM. They can be acquired from the authors or publishers, through the journals in which the articles appeared. Help in obtaining copies is also available from local medical or hospital libraries and Regional Medical Libraries, whose addresses are listed in "The Principles of MEDLARS", cited above. A "List of Journals Indexed" for Index Medicus, and thus also for the Index of Dermatology, is printed in part 1 of the January issue of Index Medicus. It may also be obtained from the Superintendent of Documents, U.S. Government Printing Office, and is available in most medical libraries.

Guidance in obtaining translations of articles in foreign languages may be supplied by the National Translation Center, John Crerar Library, 35 West 33rd Street, Chicago, Illinois 60616.

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ORGANIZATION OF THE INDEX: The Index of Dermatology is divided into four main sections, beginning on page 1 . These are:

I. A Review Section, in which only review articles are cited. These are selected in accordance with the definition of medical reviews employed by the NLM: "articles which are well documented surveys of the recent ... literature." A small number of main headings will appear in this section alone. These citations, however, may appear in other sections as well under different headings.

II. A General Section. Broadly speaking, this can be described as a "clinical" section. It includes citations on skin diseases, general and specific, as well as on causative and therapeutic agents. In addition, it includes citations on other aspects related to the skin such as immunology, mycology, virology and oral disease.

III. A Bio-Science Section. This section consists of citations of primary interest for research. It is divided, rather arbitrarily, into two parts – Part I: Biology; and Part II: Cell Components. A few main headings appearing here – chiefly anatomic terms – will also be found in the General Section, but the citations in the two will not necessarily be the same.

IV. An Author Section. Author's names are limited to three for any citation, with cross references for the second and third authors to the first where the full citation appears.

Published in cooperation with the National Libary of Medicine, U.S. Public Health Service.

SUBJECT HEADINGS

All main subject headings employed for the Index of Dermatology are listed alphabetically in the following pages in large CAPITAL LETTERS. Terms which will not appear as headings are cross-referenced to main headings. These also appear in alphabetical order, but in small letters.

The section or sections of the Index in which each main heading will appear when there is a relevant citation is indicated by a letter following the heading in parentheses, as follows:

(R) Review Section

(G) General (Clinical) Section

(B) Bio-Science Section, Part I (Biology)

(C) Bio-Science Section, Part II (Cell Components)

In MEDLARS, all main headings may be modified through the use of appropriate sub-headings. These are printed under the main headings, indented in small capital letters. The 60 standard sub-headings currently in use are:

ABNORMALITIES
ADMINISTRATION & DOSAGE
ADVERSE EFFECTS
ANALYSIS
ANATOMY & HISTOLOGY
ANTAGONISTS & INHIBITORS
BIOSYNTHESIS
BLOOD
BLOOD SUPPLY
CEREBROSPINAL FLUID
CHEMICAL SYNTHESIS
CHEMICALLY INDUCED
CLASSIFICATION
COMPLICATIONS
CONGENITAL
CYTOLOGY
DIAGNOSIS
DIAGNOSTIC USE
DRUG EFFECTS
DRUG THERAPY
EDUCATION
EMBRYOLOGY
ENZYMOLOGY
ETIOLOGY
FAMILIAL & GENETIC
GROWTH & DEVELOPMENT
HISTORY
IMMUNOLOGY
INJURIES
INNERVATION
INSTRUMENTATION
ISOLATION & PURIFICATION
MANPOWER
METABOLISM
MICROBIOLOGY
MORTALITY
NURSING
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PATHOGENICITY
PATHOLOGY
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PHYSIOLOGY
PHYSIOPATHOLOGY
POISONING
PREVENTION & CONTROL
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SECRETION
STANDARDS
SUPPLY & DISTRIBUTION
SURGERY
THERAPEUTIC USE
THERAPY
TOXICITY
TRANSPLANTATION
URINE
UTILIZATION
VETERINARY

The selection of main headings listed below results from continuing refinement of a thesaurus developed by an Advisory Committee, professional consultants and the staff of the National Library of Medicine.

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DECUBITUS ULCER

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ISOLATION & PURIFICATION

Multiple cultures in diagnosis of dermatophytosis. Smith EB, et al. **Int J Dermatol 10:267-70, Oct-Dec 71**

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[Desensitization in the treatment of eczema] Fruchard MJ. Bord Med 4:2150, Jul-Aug 71 (Fre)

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DIAGNOSIS

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COMPLICATIONS

Differential adrenal and ovarian suppression. Diagnosis and treatment of androgenic disorders in women. Cruikshank DP, et al. Obstet Gynecol 38:724-30, Nov 71

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Differential adrenal and ovarian suppression. Diagnosis and treatment of androgenic disorders in women. Cruikshank DP, et al. Obstet Gynecol 38:724-30, Nov 71

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EPIDERMAL NECROLYSIS, TOXIC

CLASSIFICATION

[Toxic epidermal necrolysis, described by Lyell] Schuppli R, et al. Hautarzt 21:59-60, Feb 70 (Ger)

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EPIDERMOPHYTON

GROWTH & DEVELOPMENT

Laboratory investigations of dermatophyte infections of nails. Genties JC. Sabouraudia 9:149-52, Jul 71

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[High dosage combined penicillin-stapenor therapy in surgery] Amann E. Wien Klin Wochenschr 82:830-3, 13 Nov 70 (Ger)

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Cutaneous angiitis. Patterns of rashes explained by (1) flow properties of blood; (2) anatomical disposition of vessels. Copeman PW, et al. Br J Dermatol 85:205-14, Sep 71
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Synthesis of compounds structurally related to poison ivy urushiol. 3. 3-n-Pentadecylcatechol and 3-n-alkylcatechols of varying side-chain length. Kurtz AP, et al. J Med Chem 14:729-32, Aug 71
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Persistent toxic erythema and chronic urticaria. Possible association with the use of measles virus vaccine. Zwemer R, et al. Arch Dermatol 104:390-2, Oct 71
Sebaceous gland secretion in cirrhosis. Greene RS, et al. Br J Dermatol 85:247-9, Sep 71
Light sensitivity and secondary plane xanthoma. Marks R, et al. Br J Dermatol 85:297-8, Sep 71

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An investigative and clinical evaluation of dermographism. Grolnick M. Ann Allergy 28:395-404, Sep 70
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Visceral herpesvirus infections in patients with cancer. Rosen P, et al. Am J Clin Pathol 56:459-65, Oct 71

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NAILS, MALFORMED

Incontinentia pigmenti (Bloch-Sulzberger syndrome). A report of four additional cases. Morgan JD. Am J Dis Child 122:294-300, Oct 71

COMPLICATIONS

Lentiginosis profusa syndrome (multiple lentigines syndrome). Selmanowitz VJ, et al. Arch Dermatol 104:393-401, Oct 71
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DIAGNOSIS

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ENZYMOLOGY

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ETIOLOGY

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NEUROFIBROMATOSIS

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DIAGNOSIS

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Neurofibroma of the recurrent laryngeal nerve. Rees G. Chest 60:414-8, Oct 71

NEVUS

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Inflammatory linear verrucose epidermal nevus. Altman J, et al. Arch Dermatol 104:385-9, Oct 71

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NEVUS, PIGMENTED

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OCCUPATIONAL DERMATITIS

CHEMICALLY INDUCED

[Experimental models of delayed hypersensitivity due to contact: clinical implications in eczematous dermatitis] Meneghini CL, et al. Folia Allergol (Roma) 18:317-35, Jul-Aug 71 (Ita)

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[Skin lesions caused by trichlorethylene (Tri) in a metal processing plant] Schirren JM. Berufsdermatosen 19:240-54, Oct 71 (Eng. Abstr.) (Ger)

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BLOOD

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Gastrointestinal complications of collagen vascular diseases. Surgical implications. Matolo NM, et al.
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[Designation "seborrhoic eczema"] Gertler W.
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TINEA PEDIS

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